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Strengthening of the coordination of humanitarian and disaster relief assistance of the United Nations, including special economic assistance

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Strengthening of the coordination of emergency humanitarian assistance of the United Nations

Report of the Secretary-General

Summary

The present report has been prepared pursuant to General Assembly resolution 46/182, in which the Assembly requested the Secretary-General to report annually to the Assembly and the Economic and Social Council on the coordination of emergency humanitarian assistance. The report is also submitted in response to Assembly resolution 70/106 and Economic and Social Council resolution 2015/14. The period covered by the report is from January to December 2015.

The report provides an overview of current efforts to improve humanitarian coordination and response. It describes major humanitarian trends, challenges and thematic issues, including respecting international humanitarian law and human rights law, enhancing humanitarian action in the age of the 2030 Agenda for Sustainable Development and the commitment to leave no one behind, better addressing forced displacement, and strengthening financing.

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I. Introduction

A. Key trends

1. For more than a decade, the level of humanitarian need and suffering has grown tremendously and 2015 was no exception. The number of people targeted by the United Nations and its partners to receive humanitarian assistance has tripled since 2005 to reach 82 million in a record 38 countries in 2015. During the same period, the requirements of coordinated inter-agency appeals have increased from $5.4 billion to $19.9 billion. In 2015, only $10.6 billion was received, which represents the largest funding gap ever.[1]

2. The majority of funding continues to be channelled to protracted or mega-crises. Of the 38 countries receiving international assistance, six crises[2] accounted for some 70 per cent of funding requirements in 2015 and six[3] have had appeals for 11 consecutive years. The average length of an inter-agency appeal remains seven years.

3. In 2015, 346 natural disasters were recorded, claiming an estimated 23,363 lives, affecting 90.3 million people and causing damage worth more than $65.2 billion. Almost half of the recorded natural disasters occurred in Asia.[4] It is estimated that 19.2 million people were displaced by disasters associated with natural hazards in 2015.[5] One of the strongest El Niño events on record has also led to substantial increases in humanitarian needs across numerous regions.

4. Millions of women, men and children are affected by brutal armed conflicts around the world, where serious violations of international humanitarian and human rights law are witnessed on a daily basis. Civilians are killed, injured and traumatized by indiscriminate shelling and aerial bombardments, or trapped and starved in besieged areas by parties to conflicts who flout international law and disrespect human dignity.

5. As a result, forced displacement reached unprecedented levels. As at December 2015, the number of people internally displaced by armed conflict and violence had reached a record of 40.8 million, an increase of 2.8 million compared with figures at the end of 2014.[5] The global refugee total had, as at mid-2015, reached 20.2 million, the highest number since 1992.[6] In addition, there are an estimated 10 million stateless persons worldwide.

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[1] Data as at 29 March 2016, from the Financial Tracking Service, available from http://fts.unocha.org.

[2] The Democratic Republic of the Congo, Iraq, Somalia, South Sudan, the Sudan and the Syrian Arab Republic.

[3] The Central African Republic, Chad, the Democratic Republic of the Congo, Somalia and the Sudan, as well as the Occupied Palestinian Territory.

[4] Centre for Research on the Epidemiology of Disasters. Data downloaded on 29 March 2016.

[5] Preliminary estimates provided by the Internal Displacement Monitoring Centre, as at 6 April 2016.

[6] Office of the United Nations High Commissioner for Refugees (UNHCR), "UNHCR mid-year trends 2015", 2015; and United Nations Relief and Works Agency for Palestine Refugees in the Near East, "UNRWA in figures as of 1 January 2015", 2015. Year-end data for 2015 were not available at the time of submission of the present report.

B. New opportunities

6. 2015 was a ground-breaking year, during which major reviews and panels called for significant changes in how the United Nations and the global community address global challenges. Member States agreed on significant new frameworks on disaster risk reduction, sustainable development and climate change.

7. With the adoption of the 2030 Agenda for Sustainable Development, Member States committed themselves to leaving no one behind, including vulnerable people, such as internally displaced persons and refugees, and those living in areas affected by complex humanitarian emergencies. In addressing the needs of people trapped in conflicts and disasters, Member States, the United Nations and partners have a critical role in contributing to the implementation of the 2030 Agenda.

8. The World Humanitarian Summit, to be held in Istanbul, Turkey, on 23 and 24 May 2016, is a major opportunity to help to address the challenges driving the escalating levels of humanitarian need and suffering. The report of the Secretary-General for the Summit, entitled "One humanity: shared responsibility" (A/70/709), sets out five core responsibilities and the Agenda for Humanity that are critical to delivering better for humanity. To achieve this, the Agenda should be taken forward during the next few years and progress on its implementation should be monitored.

9. The United Nations Conference on Housing and Sustainable Urban Development, to be held in Quito in October 2016, presents a further opportunity to address the increasingly urban nature of humanitarian crises.

II. Overview of humanitarian emergencies in 2015

A. Complex emergencies

10. In Iraq, the number of people in need of humanitarian assistance doubled to reach 10 million by December 2015. More than 1 million people were newly internally displaced, bringing the total to 3.3 million. Some 3 million people continued to live in hard-to-reach areas. Some 245,000 Syrian refugees were hosted by Iraq.

11. In Libya, the humanitarian and human rights situation deteriorated further as the political and security crises continued. The conflict was concentrated in urban areas and took a heavy toll on civilians. The number of internally displaced persons rose to 435,000, and the total number of people in need grew to 2.4 million. The breakdown in State institutions pushed the health system to the brink of collapse and left millions without basic State protection. Migrants and asylum seekers were particularly vulnerable to abuses.

12. A wave of attacks and violence since October 2015 in the Occupied Palestinian Territory and Israel resulted in the death of more than 22 Israelis, 141 Palestinians and 2 foreign nationals; thousands more were injured. Protection of civilian issues relating to the long-standing occupation and recurring cycles of violence include high casualty numbers, a rise in structure demolitions and potential forced displacement. A number of factors, including movement and access restrictions, continued to undermine livelihood and access to services. The recovery continued at a slow pace in Gaza, where some 90,000 people remained displaced.

13. In the Syrian Arab Republic, the armed conflict continued to intensify amid escalating needs and displacements. Since 2011, more than 250,000 people have been killed and more than 1 million injured, 6.5 million have been internally displaced (in addition to 500,000 Palestine refugees) and nearly 4.6 million refugees have fled to neighbouring countries and beyond. Some 13.5 million people were in dire need of humanitarian assistance, including more than 6 million children. Some 4.6 million people were living in hard-to-reach areas, of whom 486,700 were trapped in besieged areas. The protection of civilians remained a grave concern, in particular owing to the impact on civilians and civilian infrastructure of hostilities being conducted in densely populated areas, including indiscriminate attacks and attacks targeting civilians. More than half of the country's health-care facilities were either closed or only partially functioning, while 1 in 4 schools was closed, damaged or destroyed. Humanitarian access remained severely constrained as a result of insecurity, active conflict and interference by the parties.

14. Yemen was already mired in a humanitarian crisis when violence escalated in March 2015. By the end of the year, 2,795 civilians had been killed and 5,324 wounded. Around 82 per cent of the population (21.2 million people) needed humanitarian assistance. More than 2.5 million people were internally displaced, and 82,000 fled for Africa. More than 14 million people were food insecure, 19.4 million lacked access to clean water and sanitation and 14.1 million did not have adequate health care. Humanitarian response efforts were affected by the ongoing conflict, insecurity and impediments imposed by the parties to the conflict.

15. The political crisis and insecurity in Burundi, which began in April 2015, had left some 340 people dead and more than 230,000 as refugees as at December 2015. The instability led to a deterioration of fragile livelihoods, resulting in increasing numbers of food-insecure and malnourished Burundians. The Government's ability to provide basic services was also affected.

16. In South Sudan, the humanitarian situation continued to deteriorate, notwithstanding the signing of a peace agreement in August 2015. Armed conflict and intercommunal violence drove the number of displaced to 2.3 million, with 1.65 million people displaced internally and more than 650,000 refugees in neighbouring countries. At year-end, about 3.9 million people were severely food insecure, an increase of 80 per cent over the previous year. An unprecedented outbreak of malaria caused nearly 2.3 million cases and 1,340 deaths, while 2015 also saw a cholera outbreak, as well as measles outbreaks in multiple locations.

17. In the Sudan, protracted displacement and widespread protection concerns persisted in Darfur. By December 2015, there were 2.6 million internally displaced persons, including at least 100,000 people who had fled fighting between government forces and non-State armed groups, militia attacks or intercommunal violence over the course of 2015. In South Kordofan and Blue Nile States, hundreds of thousands of conflict-affected civilians remained inaccessible to United Nations humanitarian agencies. Continued violence and worsening food insecurity in South Sudan also drove close to 110,000 refugees into the Sudan in 2015, bringing the total number of South Sudanese refugees in the country to 195,000 by the end of the year.

18. The Central African Republic continued to face one of the worst protection crises in the world. The entire population of 4.6 million people was affected and a quarter of them were still displaced, with some 450,000 refugees and 452,000

internally displaced persons. In excess of half of the population suffered from extreme or severe food insecurity. More than 20 per cent of the health structures have been destroyed since the beginning of the conflict. Attacks against civilians and humanitarian workers continued in 2015.

19. In the Democratic Republic of the Congo, the humanitarian situation remained dire. Following more than 20 years of successive shocks and displacement as a result of armed conflict and violence, 7.5 million people required humanitarian assistance by the end of 2015. Some 4.5 million people were food insecure; almost half of the children under 5 years of age were chronically malnourished; more than 1.5 million people were internally displaced and 500,000 Congolese were living as refugees in neighbouring countries.

20. Despite progress made on the political front, the humanitarian situation in Somalia remained fragile owing to armed conflict, clan violence, insecurity, poor basic services, chronic underdevelopment and the impact of El Niño. About 4.7 million people — more than a third of the population — were in need of assistance and 307,000 children under 5 years of age were malnourished. Attacks by terrorist groups and non-State armed actors increased, particularly from Al-Shabaab, resulting in civilian casualties and making the delivery of aid extremely difficult owing to the targeting of humanitarian partners. More than 42,000 people were newly displaced by military operations in 2015.

21. Violence relating to Boko Haram in north-eastern Nigeria and the surrounding regions of Cameroon, Chad and the Niger exacerbated already high levels of vulnerability, food insecurity and malnutrition. By the end of 2015, some 9.2 million people in the region were in need of urgent humanitarian assistance; 2.8 million people had been forced to flee their homes, including 215,000 refugees and 2.5 million internally displaced in Cameroon, Chad, the Niger and Nigeria. Protection issues were a major concern, with children, young people and women bearing the brunt of the violence, and sexual and gender-based violence continued to be rampant.

22. In the Sahel, more than 20 million people were food insecure in 2015, and acute malnutrition threatened the lives and development of 5.8 million children under 5 years of age. Nearly 1 in 5 children in the Sahel dies before the fifth birthday and a third of these deaths are associated with malnutrition. Violent extremism and armed conflicts led to the displacement of 4.4 million people, a threefold increase in less than two years.

23. In Ukraine, despite the adoption of the Package of Measures for the Implementation of the Minsk Agreements, sporadic fighting continued along the "contact line" between government forces and armed groups. At least 3.8 million people were affected, more than 3 million of whom required humanitarian assistance. Some 800,000 people living along the "contact line" faced insecurity, severe movement constraints, the loss of livelihoods, the absence of the rule of law, protection concerns and limited access to basic services. The needs of some 2.7 million people living beyond the "contact line" in non-government-controlled areas were acute.

24. In Afghanistan, more than 335,000 people were displaced by a conflict growing in intensity and geographic scope in 2015, an increase of 78 per cent compared with 2014, bringing the total number of displaced people since 2012 to

more than 749,000. In Pakistan, the number of displaced persons decreased from 1.6 million to 1.1 million, following ongoing returns to the Federally Administered Tribal Areas in 2015.

25. Myanmar continued to experience a combination of natural disasters, armed conflict, intercommunal tensions, statelessness, trafficking and migration. More than 240,000 people remained displaced in Kachin, Shan and Rakhine States. Intercommunal tensions and restrictive policies and practices in Rakhine State affected displaced persons in camps and surrounding communities. In particular, the Rohingya faced ongoing restrictions on their freedom of movement, affecting their ability to gain access to lifesaving basic services. In desperation, many in Rakhine embarked on dangerous sea journeys, leading to a crisis in the Bay of Bengal and the Andaman Sea. Despite a nationwide ceasefire agreement being signed with eight armed groups in October 2015, unresolved conflict caused new displacement.

26. In the Philippines, early in 2015, fighting in central Mindanao between the military and police on one side, and non-State armed groups on the other, displaced more than 125,000 people. About 23,000 people remained internally displaced in Zamboanga.

27. In Haiti, the cholera epidemic affected some 36,000 people and killed 336 in 2015. According to figures released by the Dominican Republic, the binational mixed migration crisis resulted in the return to Haiti of nearly 128,000 Haitians, of whom some 15,000 were officially deported. Some 62,000 people remained displaced by the earthquake of 2010 in camps with poor living conditions, as a result of declining basic services and a lack of funding.

28. Serious violations of international humanitarian law and human rights law by parties to conflicts were reported and confirmed in a number of the complex emergencies described above.

B. Disasters associated with natural hazards

29. The 2015/16 El Niño phenomenon is one of the three strongest on record and has affected tens of millions of people since it was confirmed in May 2015. Changes to temperature and precipitation patterns induced by El Niño contributed to declining food security, nutrition, health and sanitation worldwide. The most substantial increases in humanitarian needs linked to the phenomenon were reported in Eastern Africa, Southern Africa, Central America and the Pacific islands. To date, eight countries have declared a national state of emergency, while a number of others have declared states of emergencies in particular regions.

30. Ethiopia has been the country most affected by El Niño to date. The country witnessed its worst drought in 50 years and more than 10.2 million people will need humanitarian food assistance in 2016, compared with 2.9 million early in 2015. Heavy rains and drought affected 145,000 people throughout Somalia, in addition to 550,000 in the Democratic Republic of the Congo. Some 385,000 people have been affected by drought relating to El Niño in northern Somalia. In Southern Africa, 28 million people were food insecure by the end of 2015, with an intense drought relating El Niño to adding to a poor harvest in 2014/15. In Central America, more than 4.2 million people were affected by drought conditions linked to El Niño. In Haiti, drought aggravated by the phenomenon had an impact on food security, with

3.6 million people becoming food insecure and nearly 1.5 million severely food insecure. In the Pacific, more than 3.5 million were affected by drought. Some 4.7 million people throughout South and South-East Asia were affected by heat waves and severe drought relating to El Niño. Humanitarian needs will continue to increase in 2016.

31. Several natural disasters devastated many countries in the Asia and Pacific region in 2015. In March, Tropical Cyclone Pam caused widespread damage in Vanuatu, affecting 70 per cent of the population. Nepal was hit by two consecutive earthquakes in April and May, which killed more than 8,800 people, left 5 million people in need of lifesaving humanitarian assistance and destroyed more than 600,000 homes. Flash floods and landslides devastated parts of India, while heavy flooding affected 12 of the 14 regions of Myanmar, killing 172 people, destroying crops and farmlands and temporarily displacing 1.7 million people. Typhoons Koppu (October) and Melor (December) hit the Philippines, killing several dozen people, temporarily displacing about 1 million people and damaging more than 400,000 homes.

C. Ebola virus disease emergency response and future coordination for health emergencies

32. With more than 28,600 confirmed, probable and suspected cases and more than 11,300 deaths, the Ebola virus disease crisis exposed weaknesses in national health systems in Guinea, Liberia and Sierra Leone and underscored the need for investment to strengthen their resilience. It also demonstrated that there was inadequate capacity at the global and regional levels to effectively respond to a major outbreak. While the crisis was initially considered a health crisis, the need for an inter-agency response to address its multisectoral impacts was soon recognized. The crisis was eventually curtailed, with the full involvement of a large array of humanitarian actors, and with a strengthened World Health Organization (WHO) in the field working with operational partners to implement an evolving response strategy across the various phases of the outbreak.

33. The Ebola response demonstrated the importance of first-line responders, including national and international health-care and humanitarian workers contributed by Member States, international organizations, the International Red Cross and Red Crescent Movement and non-governmental organizations. According priority to community ownership, adapting the response to urban areas and engaging with the private sector were also essential. At-risk countries need to develop and strengthen core capacities under the International Health Regulations and reinforce partnerships with communities as part of their preparedness efforts. All relevant actors should also reinforce and support national and local health-related systems.

34. The United Nations Mission for Ebola Emergency Response played an important role in providing overall leadership of the United Nations system in the affected countries. However, the experience of its ad hoc structuring also triggered a call for more predictability to respond to future public health emergencies, with WHO as the technical lead agency for international health work and the systematic and early involvement of members of the Inter-Agency Standing Committee in the operational aspects of the response. In this regard, efforts should be made by the humanitarian and public health communities to strengthen the interface between

existing humanitarian coordination and response mechanisms and those that apply during public health emergencies.

III. Delivering better for people

A. Serving the needs of people in conflict

Respect for international law

35. In 2015, civilian deaths and suffering continued unabated, owing to the blatant and shocking erosion of respect for international humanitarian law and human rights law, with repeated direct attacks against civilians and civilian infrastructure, including schools and hospitals, indiscriminate attacks, sieges and the arbitrary denial of humanitarian access.

36. The international community must invest more in preventing and finding political solutions to conflicts. When wars occur, the norms that protect and safeguard humanity must be upheld. All State and non-State parties to armed conflict must comply with the fundamental international humanitarian law rules of distinction, proportionality and precautions in — and against the effects of — attacks. These rules strictly prohibit all attacks directed against civilians, persons hors de combat and civilian objects, as well as the use of indiscriminate means and methods of warfare, and require feasible precautions to prevent and minimize civilian harm. Hospitals, schools, places of worship and other critical civilian infrastructure must not only be spared from military force, but should also not be used in support of any military effort.

37. All States must use their political and economic leverage to ensure that parties to armed conflict comply with international humanitarian law and human rights law. States must also carry out effective investigations into allegations of serious violations of international humanitarian law and human rights law and ensure that perpetrators are held accountable.

Humanitarian access

38. Meeting people's needs for food, water, medical care and other supplies vital for their survival is a core obligation of States and a fundamental prerequisite of humanity. Denying humanitarian access to besieged areas in order to achieve military gains or preventing civilians from safely leaving those areas is strictly prohibited.

39. The humanitarian principles of humanity, impartiality, neutrality and independence are central to establishing and maintaining access to populations in need and must be respected by all actors. The importance of acceptance and the ability to engage with all relevant parties has never been so apparent and remains the cornerstone of the ability of humanitarian organizations to reach people in need, and to stay and deliver.

40. States do not enjoy unfettered discretion to turn down offers of impartial humanitarian assistance if persons are in need of relief. Whenever the essential needs of civilians are inadequately met, the States concerned must not arbitrarily withhold consent to relief operations that are impartial and humanitarian.

41. All parties to armed conflict must allow and facilitate rapid and unimpeded humanitarian access, including through clear, simple and expedited procedures. These should include measures to ease movements, in particular regarding visas, permits and customs clearance, as well as exemptions from taxes, duties, fees and inspections. Clear information should also be provided on applicable procedures. These measures could be inspired, for example, by good practices established in natural disaster settings.

Protecting humanitarian and health-care workers

42. The delivery of humanitarian assistance and health care to those in need demands the highest respect and protection from the effects of hostilities. Yet, health-care workers, facilities and means of transport, the sick and wounded, as well as humanitarian workers and objects used for humanitarian relief operations, are the subject of repeated attacks, often as a tactic of war. This deprives affected populations of desperately needed lifesaving services, jeopardizes the continuation of relief operations, hinders recovery and has long-term development consequences.

43. Preliminary records from the Aid Worker Security Database show that 238 aid workers were killed, kidnapped or seriously wounded in 2015. The largest proportion of aid workers killed (71 of 96) were victims of targeted attacks or crossfire while delivering assistance. Casualties caused by aerial attacks (primarily on health facilities) have increased to unprecedented levels, with 42 people killed or injured. Almost 90 per cent of the victims (210 of 238) were national staff, who account for the majority of humanitarian and health-care workers.[7]

44. More must be done by all relevant actors to reverse this unacceptable trend. All State and non-State parties to armed conflict are bound by a strict obligation to respect and protect health-care workers, their means of transport and facilities, the sick and wounded, as well as humanitarian workers and objects used for humanitarian relief operations, against attack, threats or other violent acts. The enactment and enforcement of national laws and regulations, education and training, cooperation with local communities, sharing of challenges and best practices, and the systematic collection and reporting of data on violations are also key to enhancing the delivery and safety of humanitarian and medical assistance.

Humanitarian impact of explosive weapons in populated areas

45. The use of explosive weapons in populated areas continued to exact an unacceptable toll on civilians. Globally, 43,786 deaths and injuries from explosive weapons were recorded in 2015; 76 per cent were civilians (33,307). When explosive weapons were used in populated areas, 92 per cent of deaths and injuries were civilians, compared with 31 per cent in non-populated areas.[8]

46. The mounting deaths and horrific injuries demand action to better protect civilians from the use of such weapons, which have catastrophic longer-term impacts on the civilian population, such as the destruction of housing, schools, hospitals and critical infrastructure; the forced displacement of civilians; the loss of development opportunities; and the lethal legacy of explosive remnants of war, which kill and injure civilians for decades after hostilities have ended.

[7] As at 1 April 2016, the figures for 2015 had not been finalized.
[8] Figures provided by Action on Armed Violence.

47. All parties to armed conflict should refrain from using explosive weapons with wide-area effects in populated areas. Member States should take specific steps to address this problem as a priority, including by engaging constructively in the process launched at an international expert meeting, hosted by Austria and the Office for the Coordination of Humanitarian Affairs in September 2015, to develop a political declaration on this issue.

B. Leaving no one behind

48. The 2030 Agenda contains commitments to leaving no one behind and to reaching those furthest behind first. This involves, among other measures, meeting the needs of internally displaced persons, refugees, stateless persons and migrants and empowering and protecting women and girls.

Meeting the needs of refugees, internally displaced persons and migrants

49. In 2015, the number of refugees, asylum seekers and internally displaced persons as a result of conflict, persecution and violence exceeded 60 million worldwide. Millions more people are displaced by disasters triggered by natural hazards, with an average of more than 26 million newly displaced in each of the past seven years. More frequent and intense extreme weather events associated with climate change, as well as rising sea levels, are expected to exacerbate this trend. More than half of the refugees and internally displaced persons worldwide reside outside camps, in cities or informal settlements.

50. The large number of people fleeing conflicts and persecution across borders has found some countries ill-prepared, and in some cases unwilling, to handle such movements, resulting in greater suffering and death. Increasing numbers of refugees, asylum seekers and migrants are crossing international borders in search of protection or a better life, and more than 5,000 died during their perilous journey in 2015.[9] Often, refugees, asylum seekers and migrants caught in crises do not receive the assistance that they need, owing to fear of arrest or discrimination. Promoting social inclusion and integration for all should be a priority, including by combating xenophobia, discrimination, violence and racism.

Addressing forced displacement

51. Forced displacement is neither a short-term challenge nor only a humanitarian one: it is a complex protection, political and development challenge. For millions of those displaced within their own countries, not being left behind means having the ability to return to their homes, to be better integrated into their host communities or to settle elsewhere, if needed. While humanitarian assistance to refugees and internally displaced persons in a crisis remains essential, efforts to improve their lives and self-reliance must be strengthened. This change requires political resolve at the national and international levels to address displacement.

52. The international community should commit itself to measurably reducing internal displacement in a safe and dignified manner, including by working towards a target of 50 per cent by 2030, with the aim of achieving durable solutions for internally displaced persons. A number of operational, financial, legal and policy

[9] International Organization for Migration, Missing Migrants Project, latest global figures, 2015.

steps must be taken, adapted to each specific context: first, national Governments should lead efforts to develop and implement long-term strategies to address internal displacement and support durable solutions, as part of urban and rural development strategies; second, international organizations and partners should assist States in their efforts to reduce protracted internal displacement and not only to manage "caseloads" indefinitely; and third, Member States and regional organizations should continue to develop and apply national policies and legal frameworks, and regional frameworks, respectively, to protect and address the needs of displaced persons, on the basis of the Guiding Principles on Internal Displacement.

Opportunities to address forced displacement and migration

53. In 2016, there have been and will be a number of key events aimed at addressing the various challenges of forced displacement and migration. In March 2016, UNHCR hosted a high-level meeting with Member States on the topic "Global responsibility-sharing through pathways for admission of Syrian refugees". In May, the World Humanitarian Summit will seek commitments to stronger humanitarian and development action to address forced displacement, and enhanced support for local systems. In September, the General Assembly will hold a high-level meeting on addressing large movements of refugees and migrants to better safeguard the rights of those on the move.

Empowering and protecting women and girls

Gender equality and women's empowerment

54. Gender equality and women's empowerment are crucial for effective humanitarian action. Women and girls are disproportionately affected by crisis and exposed to gendered risks and vulnerabilities. Recognizing and addressing the differing needs, experiences and priorities of women, girls, boys and men of different ages should be the fundamental basis that informs humanitarian action, and is critical to ensuring gender equality in sustainable development.

55. To effectively address the needs of all affected populations, humanitarian actors must include women in decision-making at all levels, promote women's leadership and engage women as first responders, including through partnerships with local women's groups, civil society actors and national institutions.

56. Increased accountability mechanisms for commitments for gender equality and women's empowerment made in the global, regional and national normative frameworks are essential. The Inter-Agency Standing Committee Gender Marker and other monitoring tools must be fully integrated throughout the humanitarian programme cycle. Humanitarian funding mechanisms should also mandate and encourage gender equality programming.

Gender-based violence

57. Gender-based violence is a human rights, protection and health issue, which is exacerbated in conflict, disaster and displacement. In some crisis settings, it affects more than 70 per cent of women. Gender-based violence, including sexual violence, continued to be a deeply concerning pattern in 2015, especially against adolescent girls. Conflict-related sexual violence has been used as a deliberate form of

persecution and a driver of forced displacement, including in the context of rising violent extremism and as a tactic of terrorism (see S/2015/203).

58. The Inter-Agency Standing Committee Guidelines for Integrating Gender-based Violence Interventions in Humanitarian Action detail minimum interventions for prevention and response to gender-based violence. High-level commitment to prevent and respond to gender-based violence is essential, including through the Call to Action on Protection from Gender-based Violence in Emergencies and through increased funding for gender equality programming.

Sexual and reproductive health

59. The lack of access to sexual and reproductive health services and information in conflict areas can have severe, even fatal, consequences for women and girls. Every day, an average of 507 women and adolescent girls die from complications of pregnancy and childbirth in emergency and fragile contexts. An estimated one quarter of the people in need of humanitarian assistance in 2015 were women and adolescent girls of reproductive age. In crises, women and girls face heightened risks of HIV infection, unintended and unwanted pregnancy, child and forced marriage, intimate partner violence, rape and trafficking.[10] In addition, populations with physical, psychological or developmental disabilities have greater difficulty in gaining access to sexual and reproductive health services.

60. Investing in stronger and more resilient health systems is essential, and humanitarian and development actors have an important role to play in creating trust between communities and health systems to bridge the gap in reproductive, maternal, newborn, child and adolescent health service delivery, access and funding across the humanitarian and development continuum.

C. New way of working to reduce need, risk and vulnerability

61. Today's crises tend to disrupt people's lives for years and even decades, with people remaining dependent on aid for far too long. Predictable, timely and relevant assistance to people in need remains as important as ever. Nothing should undermine the commitment to principled humanitarian action. At the same time, there must be greater efforts to prevent crises in the first place and reduce people's needs, risk and vulnerability over time.

62. A new way of working should be developed to ensure that the needs of the millions requiring humanitarian assistance are met in accordance with humanitarian principles, while at the same time enabling all relevant actors to work together to reduce needs, vulnerability and risk and support the achievement of the 2030 Agenda. Placing greater emphasis on preventing crises and managing risks, focusing on reinforcing national, local and individual capacity, and transcending humanitarian-development divides can help to achieve this aim.

Preventing crises and managing risks

63. The Sendai Framework for Disaster Risk Reduction 2015-2030, the 2030 Agenda and the World Humanitarian Summit consultations call for a step change in

[10] *State of World Population 2015* (United Nations publication, Sales No. E.15.III.H.1).

efforts to anticipate and prevent crises. Understanding risks and acting upon them in a timely manner is essential to saving more lives and minimizing suffering. Frameworks that identify and manage risks should be in place in all contexts, risk analysis should be shared among organizations, and information and analysis should lead to early action.

64. Strong data and shared analysis, with added capacity and financial resources to ensure consistent data collection and standards, are needed to identify where the greatest risks, vulnerabilities and needs are. This requires a strengthened skill set and toolbox to enhance the ability to conduct sound crisis risk analysis, relating to both natural disasters and complex emergencies, including on urban risk. The Index for Risk Management represents an essential step towards building a strong evidence base on humanitarian crisis risks that helps to inform humanitarian and development planning.

65. More diverse tools should also be used to share risks, such as insurance-based schemes or social safety nets. Regional disaster-risk pools provide the opportunity to share disaster risks more equitably among countries. The Secretary-General's "Climate Resilience Initiative: Anticipate, Absorb, Reshape" seeks to expand the coverage of such regional risks pools to ensure that more than 30 countries are provided with $2 billion in coverage against drought, flood, cyclones and climate volatility.

Reinforcing national and local capacity

66. Resources and capacity development in prevention, mitigation, preparedness, response and recovery should be directed to national and local actors and institutions. This respects people's desire to be resilient, reduces dependency on foreign assistance and prevents longer-term, costly international engagements. Before crises strike, capacity mapping and greater connectivity is needed to identify and support the national and local actors best positioned to meet and reduce needs.

67. Partnerships with local counterparts, such as volunteers, civil society organizations, local businesses and extended diaspora networks, must be strengthened. Significant efforts must also be made to understand the priorities identified by people themselves. Open channels of two-way communication must be established to understand and respond to the changing needs of affected people.

68. Where national systems are overwhelmed or compromised by crises, or in times of conflict, international assistance plays an important role in alleviating need. Connecting with and reinforcing the capacity of local responders, and making use of the assets and capacity closest to crises, must still be central to efforts.

Transcending humanitarian-development divides

69. The 2030 Agenda provides a transformational 15-year results framework to meet the needs of people. Working towards collective outcomes that reduce need, risk and vulnerability over time on the basis of joint risk analysis and multi-year planning is essential to transcending humanitarian-development divides and ensuring that people in or at risk of crises are not left behind. In working towards these outcomes, the humanitarian principles will underpin humanitarian action.

70. Beginning with a shared understanding of the greatest needs and risks, all relevant actors should work towards collective outcomes over multiple years that

address needs and the top priority areas to improve the circumstances of crisis-affected people. Resident/humanitarian coordinators should also be empowered to enable strong leadership for the United Nations and its partners' contributions to reducing need, vulnerability and risk, by bringing together the actors who can best deliver on those priorities (those with demonstrated comparative advantage, taking into account mandate responsibilities) and coordinating the delivery of the priorities. To enable this new way of working, there will need to be a shift from funding individual projects or particular partners to funding the achievement of these collective outcomes predictably and sustainably over multiple years, and to promote early action by development actors.

D. Strengthening financing

71. Greater investment in people, local actors and national systems, by increasing their access to funding to build their capacity and respond to risks and crises, is needed. Mechanisms such as country-based pooled funds have already proven to be one of the main sources of funding for local and national responders and one of the few instruments that enable direct and decentralized field-driven humanitarian assistance. Other pooled funds, such as the Disaster Relief Emergency Fund of the International Federation of Red Cross and Red Crescent Societies, also provide much-needed direct funding to frontline responders.

72. In 2015, country-based pooled funds raised $591 million — the largest amount ever raised in a single year — and allocated $505 million in 18 countries.[11] Some 17 per cent of the allocated amount — some $85 million — was channelled to national non-governmental organizations alone, which represents a significant portion of global funding received by local and national non-governmental organizations.[12] To further build on this trend, consideration should be given to increasing the overall portion of humanitarian appeal funding channelled through country-based pooled funds to 15 per cent of appeal requirements.

73. Greater investment in high-risk areas to prepare for catastrophes and, wherever possible, prevent them altogether is also needed. In 2014, it is estimated that only 0.4 per cent of official development assistance was spent on disaster prevention and preparedness.[13] Equally, funding for peacebuilding and conflict prevention remains insufficient and greater investment for fragile situations is needed.

74. With a 10-year track record, the Central Emergency Response Fund is acknowledged as one of the most effective global humanitarian financing tools that provides swift, unearmarked and needs-based funding for lifesaving humanitarian assistance. In 2015, the Fund received $403 million in voluntary contributions and allocated $470 million for lifesaving humanitarian activities in 45 countries through rapid response and underfunded emergency grants.[14] Recognizing the Fund's unique role and with the aim of addressing the considerable increase in global humanitarian

[11] As reported to the Office for the Coordination of Humanitarian Affairs Contribution Tracking System and the Multi-Partner Trust Fund Office Gateway, as at 26 January 2016.

[12] The latest estimates available for 2014 indicate that funding given directly to local and national non-governmental organizations was 0.2 per cent of total humanitarian funding (Development Initiatives, "Global humanitarian assistance report 2015").

[13] Data retrieved from the OECD.Stat database on 19 January 2016.

[14] Data downloaded on 29 March 2016.

needs over the past decade, consideration should be given to expanding the Fund to $1 billion by 2018, including through new and additional funding sources.

75. The international community also needs to make better use of different financing instruments beyond the current practice of grants. A range of financial tools should be employed to reduce risks over a multi-year period, while incentives should be added to promote innovation as a means of developing tools that enhance preparedness and reduce fragility and risk. This would include reviewing the current development financing instruments, tools and approaches that may be used in fragile and protracted situations and that can have a complementary and positive effect in addressing humanitarian caseloads, such as risk insurance, catastrophe bonds, loans, loan guarantees and innovative mechanisms such as the proposed international solidarity levy. The United Nations, the World Bank and others should also consider the options for an international financing platform that would provide incentives for these financing practices, especially in protracted crises.

76. The successful implementation of the "grand bargain", as set forward in the report of the High-level Panel on Humanitarian Financing and endorsed in the report of the Secretary-General for the World Humanitarian Summit (A/70/709), would, among other elements, enable humanitarian actors to demonstrate greater transparency on expenditure, and donors to increase the amount of unearmarked funding and simplify reporting procedures and funding conditionalities. Broadening the donor base is also essential, and further efforts need to be made to leverage domestic resources and the private sector.

IV. Progress in the coordination of humanitarian action

77. While significantly more must be done to address the challenges driving humanitarian need and suffering, the United Nations and its partners have continued to make substantial progress in the coordination of humanitarian action in the areas described in the paragraphs below.

A. Humanitarian programme cycle

78. The introduction, two years ago, of the humanitarian programme cycle, which encourages partners to build collective responses on an improved evidence base and continuous monitoring, has been an important step in enhancing the effectiveness of humanitarian action in the field and in reducing needs and vulnerabilities. In 2015, humanitarian country teams in 15 operations developed multi-year plans and sought to strengthen the linkages between humanitarian and development assistance, build national and local capacity and incorporate risk management.

79. In the spirit of reinforcing and not replacing national and local systems, the Office for the Coordination of Humanitarian Affairs and global clusters supported humanitarian country teams to link up better with subnational coordination hubs and promote the increased participation of local governments, non-governmental organizations and other local actors. Increased attention has also been given to the coordination and delivery of cash assistance, including multipurpose cash grants, given that cash is demonstrated to be a flexible, efficient and empowering

humanitarian response modality that maximizes joint programming opportunities and collective impact, where contextually feasible.

80. In 2015, humanitarian country teams in more than 24 operations invested in more rigorous joint needs analysis. Estimates of the number of people affected by a crisis and in need of assistance have become clearer and more systematic. Some country teams, as in Afghanistan, South Sudan and the Syrian Arab Republic, developed detailed indicator-driven severity analysis of affected areas. The increased use of mobile data-collection platforms is further contributing to enhancing the speed and quality of assessments. In the Syrian Arab Republic, better profiling of the complex nature of needs in cities allowed the first urban-specific humanitarian needs overview to be piloted.

B. Data, risk analysis and information management

81. The sharing of available data in open and widely accessible formats — with appropriate security and privacy protections — is crucial for the development of sound joint analysis. In 2015, the Humanitarian Data Exchange became a central resource, comprising close to 4,000 data sets that were shared by more than 200 counterparts, including Governments, non-governmental organizations, academic institutions and United Nations entities. The data have been used to better understand the response to specific crises and analyse global challenges.

82. Risk analysis and capacity mapping should be the primary basis for determining the type and level of international engagement. In 2015, the Index for Risk Management supported the development of open-source risk models in a number of regions and countries and will continue to offer support to Governments and regional and national organizations wishing to develop subnational risk models, including by building national capacity to own and maintain such models.

83. Humanitarian actors should collect, analyse and use data disaggregated by sex, age and disability to identify, accord priority to and track the progress of the most vulnerable and disadvantaged groups, as well as those most exposed to protection risks, towards the achievement of the 2030 Agenda. There is also a need to have more urban-disaggregated data and to ensure that skills and tools are available to analyse urban risks and needs.

84. During the reporting period, the Office for the Coordination of Humanitarian Affairs continued a multi-year workstream to develop new digital platforms and systems and modernize existing ones to improve information services for the humanitarian community. In addition, the web platform of the Financial Tracking Service was enhanced, along with the underlying database, improving the transparency of humanitarian financing data and tracking new modalities, such as cash transfer programming and multi-year planning. Furthermore, many United Nations humanitarian agencies and clusters have increased the quality and scope of their information management tools, such as the UNHCR data portal or the International Organization for Migration Displacement Tracking Matrix.

C. Centrality of protection

85. Recognizing the imperative of placing protection at the centre of humanitarian action, a growing number of humanitarian organizations accord priority to protection through the integration of protection objectives or the mainstreaming of protection in their programming. There has also been progress to incorporate protection mainstreaming principles and priorities in humanitarian strategic planning and decision-making processes, in particular humanitarian needs overviews and strategic response plans. In addition, in 2015, humanitarian country teams in Iraq, South Sudan and the Syrian Arab Republic adopted strategic protection strategies acknowledging that protection is a shared responsibility and identifying key protection priorities and accountability mechanisms.

86. However, the independent whole of system review of protection in the context of humanitarian action found that, despite critical initiatives, such as the Secretary-General's Human Rights Up Front initiative and the statement by the principals of the Inter-Agency Standing Committee on the centrality of protection in humanitarian action, all actors must do more to ensure that protection is an integral part of early action, decision-making and response. Moreover, there must be zero tolerance for sexual exploitation and abuse by humanitarian workers.

87. The findings of operational peer reviews carried out by the Inter-Agency Standing Committee in several countries and recent consultations within the humanitarian sector led by the Global Protection Cluster reiterated key themes that must inform future protection efforts. First, they point to the need to better understand and capitalize on the contribution of assistance actors to protection outcomes. Second, they reaffirm the importance of the commitment of senior humanitarian leadership to ensure that protection is made a priority. Third, strong protection analysis and engagement with affected communities are essential to support effective strategies and responses. Fourth, strengthening dialogue with development, political, human rights and security actors is crucial to ensure more complementary approaches to protection, while recognizing one another's distinct roles and mandates. Fifth, clear incentives, protection-specific guidance and capacity from headquarters are also vital. Field actors must be supported by headquarters and be able to voice concerns without fear of repercussions.

D. Community engagement and accountability to affected people

88. There is an ongoing need to improve accountability to, and continuous engagement with, affected people to strengthen humanitarian effectiveness. Various tools have been developed, such as the Core Humanitarian Standard on Quality and Accountability, which has been endorsed by more than 200 non-governmental organizations. The Inter-Agency Standing Committee operational peer reviews conducted in 2015 emphasized that, while several individual organizations collected feedback from communities, it was neither consistent nor systematically captured to inform adjustments to the collective humanitarian response. The Ebola crisis also required new thinking on how to address the widespread lack of information and misunderstandings during public health emergencies and to overcome the lack of trust in responders.

89. More must be done to engage affected people more systematically and enhance accountability, including through the use of common feedback mechanisms. In the response to the earthquakes in Nepal, an inter-agency common feedback mechanism was established, which had the dual purpose of providing timely and accurate information to affected people and collecting, aggregating and analysing feedback from communities to influence decision-making processes. The launch of the inter-agency Iraq call centre is another example of a collective effort to provide timely information to affected people, while also responding to feedback and complaints, and increasing situational awareness of hard-to-reach areas. Humanitarian actors should ensure that feedback mechanisms are systematically set up from the onset of emergencies, and should consider replicating and adapting a common approach model in different contexts, especially in complex emergencies.

E. Effective partnerships and complementarity

90. The humanitarian sector aims to bring together a diverse set of partners and leverage their networks for more effective humanitarian action. In particular, the United Nations has engaged with a number of regional organizations to strengthen humanitarian coordination and response. In 2015, the United Nations and the Association of Southeast Asian Nations successfully completed their first five-year partnership framework on disaster risk reduction, response and recovery. The United Nations also supported the Caribbean Disaster Emergency Management Agency to respond to natural disasters in the Bahamas and Dominica. With technical support from the United Nations, the African Union adopted its humanitarian policy framework and disaster management guidelines. The African Union also led the development of African common positions on key global processes, namely the Sendai Framework and the World Humanitarian Summit. The United Nations also worked with regional organizations, such as the Organization of Islamic Cooperation and the League of Arab States, to continue advocating financial support for specific crises.

91. The scale and involvement of private sector actors in humanitarian action and the impact that natural disasters and conflict situations have on business are increasingly recognized. The private sector brings value and innovation, especially in key areas such as telecommunications, logistics and cash transfer. The engagement and support of the private sector are better tracked and coordinated, as in the cases of the natural disasters in Nepal and Vanuatu.

F. Strengthening human resource capacity

92. Effective humanitarian action requires the timely deployment of staff and assets. The United Nations continues to accord priority to and strengthen the timely recruitment and deployment of skilled and experienced humanitarian staff, while remaining committed to the need for gender balance and diversity in geographical representation. The Office of Human Resources Management is working with a number of other departments on diversity outreach activities and events in numerous countries. In addition, more diverse social media outlets will be used to post vacancies with the aim of attracting a greater diversity of candidates.

V. World Humanitarian Summit

93. After almost three years of extensive consultations reaching more than 23,000 people in 153 countries, the World Humanitarian Summit will be held in Istanbul on 23 and 24 May 2016. The Summit offers a historic opportunity to reinspire and reinvigorate the shared commitment of the international community to humanity and the universality of the humanitarian principles.

94. The Summit will be framed by the vision put forward by the Secretary-General in his report (A/70/709), which lays out five core responsibilities (global leadership to prevent and end conflicts; uphold the norms that safeguard humanity; leave no one behind; change people's lives — from delivering aid to ending need; and invest in humanity), and in his Agenda for Humanity. The Secretary-General calls upon Member States, the United Nations and humanitarian organizations and other relevant stakeholders to act upon these five core responsibilities to deliver for humanity. Global leaders and other stakeholders at the Summit are urged to commit themselves to taking the Agenda for Humanity forward and to making it a framework for action, change and mutual accountability. Given the urgency of ending the suffering experienced by millions of people today, the Secretary-General calls for progress to be made in the implementation of the Agenda for Humanity during the coming three years.

95. The Summit will result in a Chair's summary, as well as in a commitments to action document that will reflect the specific set of actions and commitments made by global leaders throughout the Summit. A report of the Secretary-General on the outcomes of the Summit will also be prepared in accordance with General Assembly resolution 70/106. The report will be submitted to the Assembly at its seventy-first session.

VI. Recommendations

96. On the basis of the foregoing, the Secretary-General recommends the following:

(a) Member States, non-State armed groups and humanitarian organizations should continue to promote and ensure full respect for and adherence to the humanitarian principles of humanity, impartiality, neutrality and independence;

(b) Member States and non-State armed groups should take all measures necessary to ensure compliance with international humanitarian law, and promote accountability for violations; and Member States, the United Nations and humanitarian organizations should condemn instances of such violations more consistently and systematically;

(c) Member States should investigate and ensure accountability for violations of international humanitarian and human rights law perpetrated by all parties to armed conflict, including attacks against health-care personnel, facilities and their transport, as well as humanitarian workers and objects used for humanitarian relief operations, and the wilful deprivation of items necessary for survival, by pursuing all national and international options;

(d) Member States and non-State armed groups should stop the military use and targeting of hospitals, schools, places of worship and other critical civilian

infrastructure; and Member States should adopt and effectively implement the required national measures, including legislative, regulatory and practical measures, to ensure respect for their international legal obligations pertaining to the protection of the wounded and sick and health-care personnel, facilities and medical transport;

(e) Member States and non-State armed groups should take all measures necessary to enhance their respect for the fundamental international humanitarian law rules of distinction, proportionality and precautions, including by putting in place appropriate doctrine and training;

(f) Member States, United Nations entities and civil society organizations should recognize and raise awareness of the widespread and predictable pattern of harm resulting from the use of explosive weapons with wide-area effects in populated areas, work towards a political commitment to address such use and develop practical measures to minimize civilian harm;

(g) Member States and non-State armed groups must allow and facilitate rapid and unimpeded humanitarian access;

(h) Member States should ensure clear, simple and expedited procedures for the deployment of humanitarian personnel and goods;

(i) Member States, the United Nations and humanitarian and development organizations should commit themselves to measurably reducing internal displacement in a safe and dignified manner, including by working towards a target of 50 per cent by 2030, with the aim of achieving durable solutions for internally displaced persons;

(j) Member States, the United Nations and humanitarian and development organizations should ensure better protection of and assistance to internally displaced persons and redouble their efforts and cooperation, including with the private sector and international financial institutions, to work collectively and in multi-year frameworks to address the long-term nature of displacement and to promote the self-reliance of forcibly displaced people and solutions to their plight;

(k) Member States should support the development, ratification and full implementation of regional frameworks, national policies and legal frameworks on internal displacement, on the basis of the Guiding Principles on Internal Displacement;

(l) Member States, the United Nations and humanitarian organizations should provide the human and financial resources necessary to deliver programmes responsive to the different and context-specific needs of affected people, including through the systematic collection, analysis and use of data disaggregated by age, sex and disability, and by according priority to funding for gender equality programming;

(m) The United Nations and humanitarian and development organizations should actively engage with people affected by crises, ensuring that women, girls, boys and men are included in all levels of decision-making processes, and in particular ensure the equal participation of women and girls in decision-making to include their capabilities to meet their different age- and gender-specific priorities, needs and specific vulnerabilities;

(n) Member States, the United Nations and humanitarian organizations should continue to work jointly to ensure that the rights of women, girls, boys and men are upheld and that their different needs, vulnerabilities, and capabilities are adequately integrated into preparedness, response and recovery efforts; in particular, actors should recognize and accord priority to the need for access to sexual and reproductive health services and information, programmes that prevent and respond to gender-based violence and to allocate appropriate and commensurate resources to gender equality programming, including to national organizations and women's groups;

(o) Member States, the United Nations and humanitarian organizations should strengthen accountability to affected people, including by collectively providing information to affected people and collecting, aggregating and analysing feedback from communities to influence decision-making processes;

(p) Member States, the United Nations and humanitarian organizations should consider cash equally and systematically alongside other forms of humanitarian assistance, and where cash is considered feasible, it should be the preferred and default modality;

(q) Member States and other relevant actors should increase their support for the Central Emergency Response Fund so that it will reach $1 billion in contributions by 2018, including through new and additional funding sources, as well as increase the overall portion of humanitarian appeal funding channelled through United Nations country-based pooled funds to 15 per cent of overall humanitarian appeal requirements;

(r) Member States, the United Nations and humanitarian organizations should further promote ways to enable Governments to manage and respond to risk, including by providing support to and enabling national and local leadership, preparedness and response capacities, as well as through efforts to strengthen local capacity systematically and build resilience;

(s) Member States, the United Nations and humanitarian organizations should support and invest in local and national capacity, including by increasing financing to local and national partners, and provide long-term support to develop such actors' capacity and delivery systems, and report on progress made in this regard;

(t) The United Nations and humanitarian organizations should further strengthen their efforts in supporting national Governments to map emergency preparedness and response capacities at the country and regional levels, including those of Governments, civil society, the private sector and other relevant actors, in order to better facilitate the connectivity and complementarity of disaster response efforts between national and international capacity;

(u) Member States, the United Nations and its partners should work together to reduce the needs, vulnerability and risk of women, men and children in crisis situations, to contribute to efforts to achieve the Sustainable Development Goals in the 2030 Agenda for Sustainable Development for some of the most vulnerable people and to leave no one behind;

(v) The United Nations and its partners should work together towards collective outcomes that reduce need, vulnerability and risk over multiple years, on

the basis of the comparative advantage of a diverse range of actors and a shared understanding of the needs and risks in a given context, and recognizing the importance of humanitarian principles for humanitarian action;

(w) Member States and relevant organizations should increase predictable multi-year financing to achieve collective outcomes and make better use of different financing instruments beyond the current practice of grants;

(x) Member States should work closely with the United Nations, local governments and other relevant actors to ensure more effective emergency preparedness and response in urban areas and give due consideration to this issue at the United Nations Conference on Housing and Sustainable Urban Development;

(y) Given the urgency of ending the suffering of millions in crisis situations, Member States, the United Nations and its partners are urged to take forward the core responsibilities and the Agenda for Humanity contained in the report of the Secretary-General for the World Humanitarian Summit.